

NICK MACCHIONE, FACHE
AGENCY DIRECTOR

HEALTH AND HUMAN SERVICES AGENCY

NICK YPHANTIDES, MD, MPH CHIEF MEDICAL OFFICER

EMERGENCY MEDICAL SERVICES
6255 MISSION GORGE ROAD, MAIL STOP S-555
SAN DIEGO, CA 92120-3599
(619) 285-6429 • FAX (619) 285-6531

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CAPNOGRAPHY MONITORING

Dear Critical Care Transport Provider:

As approved providers of critical care transport we know you share the County of San Diego Emergency Medical Service (CoSD EMS) Branch's commitment to providing the highest quality patient care by adoption of best practices, informed by the most recent, relevant, and evidence-based information.

In July 2017 CoSD EMS moved from "Optional" to "Mandatory" continuous quantitative End-Tidal (Et) CO2 monitoring (S-836: Critical Care Transport Unit Inventory). Continuous EtCO2 monitoring in the intubated patient has been in the CoSD EMS policies and protocols since 2007. In July 2017 CoSD protocols were updated with the following evidence-based requirements:

- Persistent CO₂ waveform and reading (other than zero) must be maintained or the ET tube/ETAD must be removed.
- If EtCO2 drops to zero (0) and does not increase with immediate troubleshooting, extubate and manually ventilate the patient via bag-valve-mask.
- Report and document capnography value, presence of waveform, and lung sounds at every patient move and at the transfer of care.

The use of continuous quantitative monitoring is an objective, real-time measure of the effectiveness of ventilation, correct tube placement, and a reliable indirect measure of perfusion. The use of quantitative capnography during transport helps to ensure the safe transport of the ventilated patient.

If you have further questions contact Cheryl Pacheco, Quality Assurance Specialist at 619-285-6504 or Cheryl.Pacheco@sdcounty.ca.gov.

Thank you for all you do to provide quality, timely, and evidence-based care to our residents and visitors.

Sincerely,

Kristi L. Koenig, MD, FACEP, FIFEM, FAEMS, Medical Director

Emergency Medical Services

Kristi Koinig

County of San Diego Health & Human Services Agency